

**FORMAL COMPLAINT OF SEXUAL HARASSMENT**

Name of Complainant: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of Victim: \_\_\_\_\_

Name of Respondent: \_\_\_\_\_

Location of Incident/Incidents: \_\_\_\_\_

Description of the Incident/Incidents: (Attach additional sheets, if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Witnesses:

\_\_\_\_\_  
\_\_\_\_\_

I understand that by signing this formal written complaint form, I am making a formal complaint of sexual harassment and, as a result, an investigation and determination of responsibility will occur.

\_\_\_\_\_  
Complainant

\_\_\_\_\_  
Date

Received by: \_\_\_\_\_  
Title IX Coordinator

\_\_\_\_\_  
Date